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T-454 P.001/013 F-895

JUL 25 2005



OFFICIAL COMMUNICATION

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San Diego, CA 92121
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Facsimile Transmittal

DATE: July 25, 2005

TO: Amendment
Commissioner for Patents

ATTN: Examiner: Gregory Issing
Art Unit: 3662

FAX NUMBER: ~~(603) 872-2306~~ 571 273 8300

FROM: Donald C. Kordich, Attorney for Applicant
Registration No. 38,213

Total Number of Pages Sent: 13 (including this transmittal cover sheet)

FILING BY FACSIMILE:

ATTORNEY DOCKET NO.: 010124C1

ENCLOSED ARE:

- Amendment (10 pages)
- Transmittal (in duplicate)

APPLICANT: Samir S. Soliman

ASSIGNEE: QUALCOMM Incorporated

SERIAL NO.: 10/672,824

FILED: April 26, 2004

FOR: WIRELESS COORDINATION AND MANAGEMENT SYSTEM

Please contact Victoria J. Pacey at (858) 651-3411 if all pages do not transmit.

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PTO/SB/21

U.S. Department of Commerce
Patent and Trademark Office
PATENT

AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer No.: 23696
Attorney Docket No.: 010124C1
In Re Application of: Samir Soliman
Serial Number: 10/672,824
Filed: April 26, 2004
Examiner: Gregory Issing
Group Art Unit: 3662

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	24	44	0	x \$50 =	\$0
Independent**	5	9	0	x \$200 =	\$0
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$360	\$
EXTENSION FEES				<input type="checkbox"/> One Month	\$120
				<input checked="" type="checkbox"/> Two Months	\$450
				<input type="checkbox"/> Three Months	\$1020
TERMINAL DISCLAIMER				\$130	\$
				TOTAL FEE	\$

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$_____.
The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: July 25, 2005

Signature: 

Donald C. Kordich, Reg. No. 38,213
Phone No. (858) 658-5928

QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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- ☐ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Depositor's Name: Victoria J. Pacey

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Signature: 

(TRANSAMD.VER1.13-04/30/04)

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Attorney Docket No. 010124C1

JUL 25 2005

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of

Samir S. Soliman

Serial No. 10/672,824

Filed: September 26, 2003

**For: WIRELESS COORDINATION
AND MANAGEMENT SYSTEM**

Group No. 3662

AMENDMENT

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Dear Sir:

In response to the Office Action dated February 24, 2005, the time for responding having been extended until July 25, 2005, (July 24, 2005 is a Sunday) please amend the above-identified application as follows:

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

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Depositor's Name: Victoria J. Pacey
(Type or print name)

Signature: [Signature]